UTILITY PATENT APPLICATION TRANSMITTAL © DUPLICATE								
Address to: Box PATENT APPLICATION				Attorney Docke	t No.	LINJ3050/EM	P TO	
Commissioner of Patents P.O. Box 1450				First Named In (or identifier)	ventor	Jiin-Huey Chern L	. •	
Alexandria, VA 22313-1450				Total Pages		25	86 t	
A	Transmi	tted h	erewith is a pater	ion under 37 CFR 1.53(b).				
Entitled:	Metho	od Fo	r Forming A Hard	Forming A Hardened Cement In A Bone Cavity				
⊠ 1.	Submitted herewith are the following:							
	13 pages of specification, including claims and Abstract. 2 sheets of FORMAL drawings (Figs. 1A, 1B, 1C, 1D, 1E, 2). 17 claims. 1 Oath/Declaration signed by each inventor. 1 Application Data Sheet. 1 Assignment of the invention to CANA LAB CORPORATION, Taipei, Taiwan, Cover Sheet, and payment of the \$40 recordal fee. 1 check in the amount of \$415 (\$375- Filing Fee; \$40- Assignment Recordation Fee).							
⊠ 2.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.							
⊠ 3.	The Comr any fees r	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.						
□ 4 .		Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed						
□ 5.		Insert before the first sentence of the specification: This application is a Continuation-in-part of nonprovisional application number filed						
□ 6.	Other:	Other:						
The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.								
Γ.		ILING FE	EE IS CALCULATED AS FOL	LOWS:	r	Basic Fee:	\$750.00	
Total Claims:		17	- 20 =		0	X \$18 =	\$0.00	
Independent Claims: Correspondence Address:		1	- 3 =		0 Multiple Deper	X \$84 =	\$0.00 \$0.00	
BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor			23364 CUSTOMER NUMBER		Multiple Dependent Claim (add \$280.00): Subtotal:		\$750.00	
	, VA 22314-		SOSTOMER NOME			50% Reduction if Small Entity Status:		
Phone: 70	3-683-0500		Fax: 703-683-1080		Total:		\$375.00	
Date:		Name:			Signature:		Reg. No.	
September 29, 2003		Richard E. Fichter		Richard & Fichto 26		26,382		